

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

----- x

HORACE GAINES,

Plaintiff,

-against-

**ANSWER TO AMENDED
COMPLAINT**

08-CV-2208 (VM)

THE CITY OF NEW YORK DEPARTMENT OF
CORRECTION, CORRECTION WARDEN VALERIE
OLIVER, CORRECTION CAPTAIN WILLIAMS #127,
CORRECTION OFFICER WALKER #17122,
CORRECTION OFFICER TOBERT #15886,
CORRECTION OFFICER FENELON,

Defendants.

----- x

Defendants the City of New York Department of Correction (“DOC”), Correction
Warden Valerie Oliver, Correction Captain Williams #127, Correction Officer Walker #17122,
Correction Officer Tobert #15886, and Correction Officer Fenelon,¹ by their attorney, Michael
A. Cardozo, Corporation Counsel of the City of New York, for their Answer to the Amended
Complaint² (“the Complaint”), respectfully allege as follows:

¹ Plaintiff, who is *pro se*, refers to Defendant “Correction Warden Valerie Oliver”, who upon information and belief is Chief Valerie Oliver; Defendant “Correction Officer Walker #17122”, who upon information and belief is Correction Officer Christian Woelker; and Defendant “Correction Officer Tobert #15886,” who upon information and belief is Correction Officer Alfredo Tolentino. Accordingly, hereafter, Defendants “Warden Valerie Oliver”, “Correction Officer Walker”, and “Correction Officer Tobert” will be referred to as Chief Valerie Oliver, Correction Officer Christian Woelker, and Correction Officer Alfredo Tolentino.

² For the purposes of this Answer, Defendants have broken down the Amended Complaint into numbered paragraphs, a copy of which is annexed as Exhibit 1.

1. Deny the allegations set forth in Paragraph 1 of the Complaint, except admit that Plaintiff purports to proceed as described therein.

2. Deny the allegations set forth in Paragraph 2 of the Complaint, except admit that Plaintiff purports to proceed as described therein.

3. Deny the allegations set forth in Paragraph 3 of the Complaint, except admit that Plaintiff purports to proceed as described therein.

4. Deny the allegations set forth in Paragraph 4 of the Complaint, except admit that upon information and belief, Plaintiff Horace Gaines ("Plaintiff") is deaf, and admit that Plaintiff was in DOC custody at all times from December 3, 2007 to December 8, 2007, and admit that on December 5, 2007 at 5:07 p.m. Plaintiff was transferred from DOC's Vernon C. Bain Center ("VCBC") to DOC's Anna M. Kross Center ("AMKC").

5. Deny the allegations set forth in Paragraph 5 of the Complaint, except admit that on December 8, 2007, Plaintiff was housed at DOC's George Motchan Detention Center ("GMDC") in the 6 Main B side cell housing area.

6. Deny the allegations set forth in Paragraph 6 of the Complaint.

7. Deny knowledge or information sufficient to form a belief as to the truth of the allegations set forth in Paragraph 7 of the Complaint, except deny that Defendants acted with deliberate indifference.

8. Deny the allegations set forth in Paragraph 8 of the Complaint.

9. Deny the allegations set forth in Paragraph 9 of the Complaint.

10. Deny the allegations set forth in Paragraph 10 of the Complaint.

11. Deny the allegations set forth in Paragraph 11 of the Complaint, except admit that Plaintiff purports to proceed as described therein.

12. Deny the allegations set forth in Paragraph 12 of the Complaint, except admit that Plaintiff purports to proceed as described therein.

13. Deny the allegations set forth in Paragraph 13 of the Complaint, except admit that DOC has a grievance procedure for inmates, and respectfully refer the Court to DOC Directive #3375RA, *Inmate Grievance Resolution Procedure*, dated March 13, 2008, for a full and accurate description of DOC's grievance procedures.

14. Paragraph 14 does not allege any factual assertions that require a response, however, to the extent that it is construed to do so, Defendants deny and respectfully refer the Court to DOC Directive #3375RA, *Inmate Grievance Resolution Procedure*, dated March 13, 2008, for a full and accurate description of DOC's grievance procedures.

15. Deny the allegations set forth in Paragraph 15 of the Complaint, except admit that Plaintiff filed a complaint with the GMDC Inmate Grievance Resolution Committee ("IGRC") dated January 10, 2008, and respectfully refer the Court to the January 10 complaint, which is attached as an exhibit to the Complaint, for a full and accurate description of its contents.

16. Paragraph 16 does not allege any factual assertions that require a response, however, to the extent that it is construed to do so, Defendants deny.

17. Paragraph 17 does not allege any factual assertions that require a response, however, to the extent that it is construed to do so, Defendants deny.

18. Deny the allegations set forth in Paragraph 18 of the Complaint, and respectfully refer the Court to DOC Directive #3375RA, *Inmate Grievance Resolution Procedure*, dated March 13, 2008, for a full and accurate description of DOC's grievance procedures.

19. Deny the allegations set forth in Paragraph 19 of the Complaint, except admit that Plaintiff is requesting the relief set forth therein.

20. Deny knowledge or information sufficient to form a belief as to the truth of the allegations set forth in Paragraph 20 of the Complaint.

FIRST AFFIRMATIVE DEFENSE

21. The Complaint fails to state a claim upon which relief can be granted.

SECOND AFFIRMATIVE DEFENSE

22. Defendants have not violated any of Plaintiffs' rights, privileges or immunities under the U.S. Constitution, the laws of the United States, the New York Constitution, or any laws of the State of New York.

THIRD AFFIRMATIVE DEFENSE

23. At all times relevant to the acts alleged in the Complaint, Defendants acted reasonably, properly, lawfully, and in good faith, and did not act with deliberate indifference.

FOURTH AFFIRMATION DEFENSE

24. Defendants exercised reasonable care and breached no duties.

FIFTH AFFIRMATIVE DEFENSE

25. The Court lacks personal jurisdiction over some or all of the Defendants.

SIXTH AFFIRMATIVE DEFENSE

26. Some or all of the individually named Defendants are immune under the doctrine of qualified immunity.

SEVENTH AFFIRMATIVE DEFENSE

27. Plaintiff has failed to exhaust his administrative remedies as mandated by the Prison Litigation Reform Act.

WHEREFORE, Defendants request judgment as follows:

A. in favor of Defendants dismissing the Complaint and denying all relief requested therein;

B. for costs, fees and other disbursements incurred in connection with this action; and

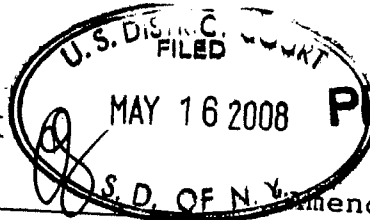
C. for such other and further relief as the Court deems just and proper.

Dated: New York, New York
July 7, 2008

MICHAEL A. CARDOZO
Corporation Counsel of the
City of New York
Attorney for Defendants
100 Church Street, Room 2-165
New York, New York 10007
212-788-1165

By: /s/
Heather R. Skeeles-Shiner
Assistant Corporation Counsel

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK



PRO SE

Horace Gaines

Amended Complaint
No. 08 Civ. 2208 (VI)

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

#10

COMPLAINT

under the
Civil Rights Act, 42 U.S.C. §
(Prisoner Complaint)

Jury Trial: ☒ Yes ☐ No
(check one)

The City Of New York Department of
Correction, Correction Warden Valerie Oliver,
correction Captain williams #127,
Correction Officer Walker # 17122
Correction Officer Tobert #15886
Correction officer fenelon,

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

1. A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name Horace Gaines

ID # 441-07-14618

Current Institution GMDC 15-15 Hazen Street

Address East Elmhurst, new York 11370

2. B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

RECEIVED
SDNY PRO SE OFFICE
2009 MAY 16 P 4:38

Defendant No. 1 Name Correction Warden Valerie Oliver Shield #
Where Currently Employed AMKC 18-18 Hazen St.
Address East Elmhurst, new York 11370

Defendant No. 2 Name correction Captain Williams Shield # 127
Where Currently Employed AMKC 18-18 Hazen St.
Address East Elmhurst, New York 11370

Defendant No. 3 Name Correction Officer Walker Shield # 17122
Where Currently Employed AMKC 18-18 Hazen St.
Address East Elmhurst, New York 11370

Defendant No. 4 Name Correction Officer Tobert Shield # 15886
Where Currently Employed AMKC 18-18 Hazen St.
Address East Elmhurst, new York 11370

Defendant No. 5 Name Correction Officer Fenelon, Shield #
Where Currently Employed GMDC 15-15 Hazen St.
Address East Elmhurst, New York 11370

3. II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

- A. In what institution did the events giving rise to your claim(s) occur? Rikers Island
AMKC 18-18 Hazen st. East Elmhurst, New York (C-95)
- B. Where in the institution did the events giving rise to your claim(s) occur? The
Receiving Room- Intake area Pen # (2)
- C. What date and approximate time did the events giving rise to your claim(s) occur? The
Starting date of 12/5/07, Time 5:00 o'clock p.m. Till 12/8/07
4:20 p.m.

4. D. Facts: on 12/5/2007 Plaintiff HORACE GAINES, a Deaf Mute Inmate was transferred from V.C.B.C (The Boat) to Rikers Island C-71 Clinic then to C-95 receiving room at 5:00 p.m. then to C-95 Clinic, as Plaintiff was done seeing medical Plaintiff was sent back to the receiving room in C-95 in which he staid until 12/4/2007 the next day, Plaintiff was then removed from the intake area again to sit at clinic throuh another process of waiting to be placed in a Bed, "up to Five hours" and then sent back to the receiving room area (Pen 2) in which Plaintiff staid another six hours without a bed nor giving anything to eat, then taken again back to pen#2 in the receiving room. This same process went on from 12/3/07 till 12/7/07 a 72 hours and still not placed in a bed. Dorm nor Housing area or given something to eat. At this point the 4:00 p.m. to 12:00 a.m. Clinic officer Toberthnotifed the intake G.O. Capt. that the Plaintiff was way over his time without a bed and had to be out A.S.P. on 12/8/07 2:00 a.m. Plaintiff was still at C-95 intake But later was taken to C-73 at 3:00 a.m. and escorted to 6-mian housing area at 5:55 to cell-17 for five minuts then at 6:00 a.m. escorted back to C-73 intake placed on a bus and taken to G.M.V.C. to go back and forth from C-73 to G.H.V.C.

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

(SEE ATTACHED)

10. III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. As this whole matter went on Plaintiff suffered a seizure. had never received his medication. was never given anything to eat. was never placed in a bed. Dorm. or Housing area. and forced to Deaficate on himself because Plaintiff Signed to D.O.C. Capt. Williams#127. and D.O.C. Officer Walker #17122 for the bathroom yet they made fun of his disability of being a Deaf Mute cousing him to use the bathroom on himself

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

11. A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes ☒ No ☐

Continue From Page 3

5. Until 4:00 P.M. on 12/8/2007 Plaintiff was taken back to C-73 and sent back to 6 mian loged in to cell 17 B-side 6. As this whole matter went on Plaintiff never was told why he was being taken through this problem nor was he given his medication, nor fed, or allowed to go to the bathroom, or Placed in a bed.
7. Plaintiff, went to Social Service to file a complaint and needed the break down printout from the computer to show the Deliberate Indifference 8. and learned that the Dates and locations had been changed to look as though every matter for having Plaintiff in a bed dorm, or housing unit at the right time was done correctly.
9. The D.O.C. Personnals Involed with the Deliberate Indifference to violating Plaintiff Medical and Physical needs which has violated a Court Order are Correctionnal Warden Valerie Oliver , Correctionnal Capt. of C-95 Intake Williams #127, Correctionnal officer of C-95 Intake Walker #17122, Correction Officer Tobert #15886 , Correctionnal officer of C-73 Intake Fenelon,

ENDING OF PAGE 3

12. If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s). 18-18 Hazen st. east Elmhurst
New York 11370

13. B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?
 Yes x No Do Not Know

14. C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?
 Yes No Do Not Know x

If YES, which claim(s)?

15. D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?
 Yes x No

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes x No

- E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

15-15 Hazen st east Elmhurst New York 11370

1. Which claim(s) in this complaint did you grieve? All Matters concering
caring for an Inmate

2. What was the result, if any? N/A

16. 3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process. Because this complaint deals
with Staff of D.O.C. THE appeal goes to the Warden

- F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

17. 2. If you did not file a grievance but informed any officials of your claim, state who you

informed, when and how, and their response, if any: All matters
are brought through the office of complaince
consultants.

18. G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. This complaint is a non-Grievable Issue outlined in Directive#3375R

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies. Place see Exhibit A

19. V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). Plaintiff, Respectfully
request that this Court, Order and make the D.O.C. Defend-
ants named in this action an example by Ordering them to
"Personally" Pay too plaintiff \$1,500.00 "each" a month for
Five years, for violating Plaintiff Rights by law, Cousing
his pain and suffering. Sending this message to all D.O.C.
Employees that this Court Order will not be Ignored nor
will this behavior be tolerated. Plaintiff also request
that he be Awarded \$2,800,000 . for his Mental Phycital
and Emotional suffering and the Deliberate indifference to
Plaintiff Medical, Physical, and Psychological needs. and what
ever else this Court may see just in this matter.

20. VI. Previous lawsuits:On
these
claims

- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes ____ No x

- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff N/A

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes ____ No ____

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

On
other
claims

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes x No ____

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff HORACE LEE GAINESDefendants Supreme COURT Et, Al.,

2. Court (if federal court, name the district; if state court, name the county) N/A

3. Docket or Index number N/A

4. Name of Judge assigned to your case N/A

5. Approximate date of filing lawsuit Jan 2007

6. Is the case still pending? Yes x No ____

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?)

ON GOING

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 6 day of MAY, 2008
State of New York
County of The Bronx ss.
Sworn to Before
Me on 05/06/08
Jabul Naz Sulehria
NOTARY PUBLIC, State of New York
No. 018U5082800
Qualified in Kings County
Commission Expires Nov. 27, 2009

Signature of Plaintiff

Inmate Number

Institution Address

Horace Gaines

44107 14618

15-15 HAZEN ST

EAST ELMHURST, N.Y.

11370

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 6 day of MAY, 2008 I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff: Horace Gaines
State of New York
County of The Bronx ss.
Sworn to Before
Me on 05/06/2008
Jabul Naz Sulehria

JOBAL NAZ SULEHRIA
NOTARY PUBLIC, State of New York
No. 018U5082800
Qualified in Kings County
Commission Expires Nov. 27, 2009

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

HORACE GAINES

(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

"Amended Complaint"

08 Civ. 2208 (VM) ()

- against -

AFFIRMATION OF SERVICE

The City OF New York Department

OF Correction, . Correctional Warden

John Doe, Corr, Capt. Williams #127,

Corr, officer Walker #17122, Et, Al.,

(In the space above enter the full name(s) of the defendant(s)/respondent(s).)

State of New York
County of the Bronx } S.S.

I, HORACE GAINES, declare under penalty of perjury that I have
(name)

served a copy of the attached Civil Rights Act, 42 U.S.C. § 1983
(document you are serving)

upon D.O.C. Et, Al., whose address is 18-18 hazen
(name of person served)

St. Anna m. Kross Detention center, East Elmhurst N.Y. 11370
(where you served document)

by U.S. Marshall
(how you served document: For example - personal delivery, mail, overnight express, etc.)

Dated: MAY 6, 2008
(Month/day) (state)

Bronx N.Y., 2008
(city) (day) (year)

Sworn to before
me on 05/06/2008
John N. Yall

IOBAL NAZ SULEHRIA
NOTARY PUBLIC, State of New York
No. 01805082800
Qualified in Kings County
Commission Expires Nov. 27, 2009

Horace Gaines
Signature

15-15 Hazen St.
Address

East Elmhurst N.Y.
City, State

11370
Zip Code

None
Telephone Number

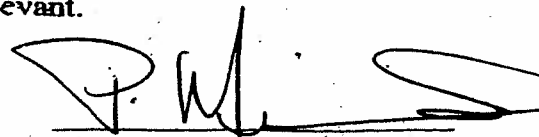
The City of New York
Department of Correction

INMATE GRIEVANCE RESOLUTION COMMITTEE

Date : January 16th 2008
To : Horace Gaines #441-07-14618 6 Main
From : IGRC / GMDC
Subject : NON-GRIEVABLE COMPLAINT

On 1/16/08 the IGRC received your complaint. The Purpose of this memo is to inform you that the complaint submitted by you has been determined by this committee to be a non-grievable complaint as outlined in Directive #3375R, thus not falling within the jurisdiction of the Inmate Grievance Resolution Committee (IGRC). The reason that your complaint is non-grievable is:

- that the matter does not fall under the purview of the IGRP.
- that the matter pertains to an alleged assault/harassment.
- that the matter has been filed with another Agency, court or the Inspector General's office.
- that the matter is in litigation.
- ✓ that the action requested is to censor, discipline or remove the staff person from an assignment and that is beyond the purview of the IGRC as per CORC Disposition #1421/82.
- that there is already an existing appeal mechanism within the Department of Correction.
- that it is a matter outside the jurisdiction of the Department of Correction.
- that the complaint does not directly affect the grievant.


Grievance Coordinator

C: Warden

Form #

GRIEVANT'S STATEMENT FORM

1/16/08
Box Pick up

Facility: GMDC

Grievance No: _____

Cat _____

Grievant's Name Horace Gaines Book & Case # 44107 14618Location: 6m Date: 1/10/08

IGRP/GMDC 1/16/08
 that the action requested is to censor, discipline or remove the staff person from an assignment and that is beyond the purview of the IGRC as per CORC work sheet from file in the grievant's Disposition #1421/82.

ON 12/3/07 I HORACE GAINES A DEAF MUTE INMATE WAS TRANSFERRED FROM V.C. TO Rikers Island C-95 intake then to C-71 receiving clinic at 5:00 P.M. then to C-95 clinic. AS PLAINTIFF WAS DONE SEEING MEDICAL HE WAS SENT BACK TO INTAKE IN WHICH HE STAYED UNTIL 12/4/07 THE NEXT DAY, GAINES WAS THEN REMOVE FROM THE INTAKE AND ESCORTED BACK TO THE CLINIC TO SIT THROUGH ANOTHER PROCESS OF NOT BEING FED NOR BEING GIVEN PLACED IN A BED, AND SENT BACK TO INTAKE 3 TIMES AND STILL NOTHING. THIS PROCESS WENT ON FOR 106 hours FROM 12/3/07 TO 12/8/07 2:40 A.M. UNTIL BEING TRANSFERRED TO G.M.D.C. INTAKE AT 3:00 A.M. HE WAS SENT TO HOUSING UNIT 6M AT 5:50 A.M. ONLY TO BE ESCORTED BACK TO INTAKE AT 6:00 A.M. THEN BACK AND FORTH FROM 73 TO BECON FOR 15 HOURS, TO BACK UP THESE FACTS IT WILL NOT BE FOUND IN THE COMPUTER, ONLY IN HOUSING UNIT LOG BOOK 12/3/07, AND AT G.M.D.C. 6M ON 12/8/07

ACTION

REQUESTED: PLAINTIFF REQUEST THAT DOC. C-95 WARDEN, CORN. CAPT WILLIAMS #127 CORN. OFFICER WALKER #17122, CORN. CLINIC OFFICER MS. ALAN, AND G.M.D.C. INTAKE 6 TO: OFFICER PAY PLAINTIFF \$1500.00 EACH A MONTH FOR FIVE YEARS FOR VIOLATING A COURT ORDER, PLAINTIFF RIGHTS AS A HANDICAP DEAF MUTE, BY NOT HOUSING HIM IN A BED TO DEAFENATE ON HIMSELF

X

Grievant agree to have his statement edited for clarification by IGRP staff

X

I am requesting that the grievance be written for me by the IGRP staff

1/10/08
Date

Horace Gaines
Grievant's Signature

Witness (IGRP Representative)

C.C.
H.G.

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORKHorace Gaines

(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

- against -

The City Of New York Department Of Corr,
correction Warden Valerie Oliver, Corr,
Capt. Williams #127, Corr. Officer walker
#17122, Corr. Officer Tobert #15886 Et, Al.,

(In the space above enter the full name(s) of the defendant(s)/respondent(s).)

08 Civ. 2208 (VM) ()

AFFIRMATION OF SERVICE

I, Horace Gaines, declare under penalty of perjury that I have
(name)served a copy of the attached Civil Rights Act ,42 U.S.C. § 1983

(document you are serving)

upon D.O.C. Officer tobert #15886 Et, Al., whose address is 18-18 Hazen
(name of person served)Street anna M. Kross center, east Elmhurst, New york 11370
(where you served document)by Ordinary first-Class Mail

(how you served document: For example - personal delivery, mail, overnight express, etc.)

Dated: Bronx, N.Y.
(town/city) (state)May 7, 2008
(month) (day) (year)State of New York
County of the Bronx ss.
Sworn to Before me
on 05/07/08
Iqbal Naz SulehriaIOBAL NAZ SULEHRIA
NOTARY PUBLIC, State of New York
No. 01SU6062800
Qualified in Kings County
Commission Expires Nov. 27, 2009Horace Gaines
Signature15-15 Hazen St.
AddressEast Elmhurst
City, StateNew York 11370
Zip CodeNone None
Telephone Number

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Horace Gaines

(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

- against -

The City Of New York Department Of Corr,
correction Warden Valerie Oliver, Corr,
Capt. Williams #127, Corr. Officer walker
#17122, Corr. Officer Tobert #15886 Et, Al.,

(In the space above enter the full name(s) of the defendant(s)/respondent(s).)

08 Civ. 2208 (VM) ()

AFFIRMATION OF SERVICE

I, Horace Gaines

(name)

, declare under penalty of perjury that I have

served a copy of the attached Civil Rights Act ,42 U.S.C. § 1983

(document you are serving)

upon D.O.C. warden Valerie Olver Et, Al., whose address is 18-18 Hazen

(name of person served)

Street Anna M. Kross Detention Center, East elmhurst, N.Y. 11370

(where you served document)

by Ordinary first-Class Mail

(how you served document: For example - personal delivery, mail, overnight express, etc.)

Dated: Bronx, N.Y.

(town/city)

(state)

May 7, 2008

(month)

(day)

(year)

State of New York
County of The Bronx } ss.

Sworn To Before
Me on 05/07/2008

Zahid Naz Suleh

IOBAL NAZ SULEHIA
NOTARY PUBLIC, State of New York
No. 015U5062800
Qualified in Kings County
Commission Expires Nov. 27, 2009

Horace Gaines

Signature

15-15 HAZEN ST.

Address

East Elmhurst,

City, State

New York 11370

Zip Code

NEW YORK NONE

Telephone Number

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Horace Gaines

(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

- against -

The City Of New York Department Of Corr,
correction Warden Valerie Oliver, Corr,
Capt. Williams #127, Corr. Officer walker
#17122, Corr. Officer Tobert #15886 Et, Al.,

(In the space above enter the full name(s) of the defendant(s)/respondent(s).)

08 Civ. 2208 (VM) ()

AFFIRMATION OF SERVICE

I, Horace Gaines

(name)

, declare under penalty of perjury that I have

served a copy of the attached Civil Rights Act ,42 U.S.C. § 1983

(document you are serving)

upon D.O.C. capt. Williams #127 Et, Al., whose address is 18-18 hazen

(name of person served)

Street Anna M. kross Center, east Elmhurst, New york 11370

(where you served document)

by Ordinary first-Class Mail

(how you served document: For example - personal delivery, mail, overnight express, etc.)

Dated: Bronx, N.Y.

(town/city)

(state)

May

7

2008

(month)

(day)

(year)

State of New York
County of The Bronx ss.

Sworn to Before me
on 05/07/08.

Rachel Nay Sullivan

Horace Gaines
Signature

15-15 HAZEN ST.
Address

EAST Elmhurst
City, State

New York 11370
Zip Code

NONE NONE
Telephone Number

IQBAL NAZ SULEHRIA
NOTARY PUBLIC, State of New York
No. 013U5062600
Qualified in Kings County
Commission Expires Nov. 27, 2009

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Horace Gaines

(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

08 Civ. 2208 (VM) ()

- against -

AFFIRMATION OF SERVICE

The City Of new York Department Of

correction, Correction Warden Valerie

oliver, Corr, Capt. Williams # 127, Corr,

officer Walker#17122, C.O. Tobert#15886 ET,AL.,

(In the space above enter the full name(s) of the defendant(s)/respondent(s).)

I, Horace Gaines

(name)

declare under penalty of perjury that I have

served a copy of the attached Civil rights Act, 42 U.S.C. § 1983
(document you are serving)

upon D.O.C. Officer Walker#17122 Et,AL., whose address is 18-18 Hazen
(name of person served)

Street Anna M. Kross Detention Center, East Elmhurst, N.Y. 11370
(where you served document)

by ordinary first-class mail

(how you served document: For example - personal delivery, mail, overnight express, etc.)

Dated: Bronx, N.Y.
(town/city) (state)

May, 7, 2008
(month) (day) (year)

state of New York
county of The Bronx ss.
Sworn to Before Me
on 05/07/08

Ednel Naya Subli

IOBAL NAZ SULEHRIA
NOTARY PUBLIC, State of New York
No. 018U5082800
Qualified in Kings County
Commission Expires Nov. 27, 2009

Horace Gaines
Signature

15-15 Hazen St.
Address

East Elmhurst,
City, State

New York 11370
Zip Code

None None
Telephone Number

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Horace Gaines

(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

- against -

08 Civ. 2208 (VM) ()

The City Of New York Department Of Corr,
correction Warden Valerie Oliver, Corr,
Capt. Williams #127, Corr. Officer walker
#17122, Corr. Officer Tobert #15886 Et, Al.,

(In the space above enter the full name(s) of the defendant(s)/respondent(s).)

AFFIRMATION OF SERVICE

I, Horace Gaines

(name)

, declare under penalty of perjury that I have

served a copy of the attached Civil Rights Act ,42 U.S.C. § 1983

(document you are serving)

upon D.O.C. Officer feneion, Et, Al., whose address is 15-15 hazen

(name of person served)

Street George Motchan Detention Center, East Elmhurst, New York 11370

(where you served document)

by Ordinary first-Class Mail

(how you served document: For example - personal delivery, mail, overnight express, etc.)

Dated: Bronx, N.Y.

(town/city)

(state)

May

(month)

7

(day)

2008

(year)

State of New York
County of The Bronx ss
Sworn to Before me
on 05/07/08

Zahar Naz Sullen

IOBAL NAZ SULEHRIA
NOTARY PUBLIC, State of New York
No. 01306052600
Qualified in Kings County
Commission Expires Nov. 27, 2009

Horace Gaines

Signature

15-15 Hazen St.

Address

East Elmhurst

City, State

New York 11370

Zip Code

NONE NONE

Telephone Number

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Horace Gaines

(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

- against -

The City Of New York Department Of Corr,
correction Warden Valerie Oliver, Corr,
Capt. Williams #127, Corr. Officer walker
#17122, Corr. Officer Tobert #15886 Et, Al.,

(In the space above enter the full name(s) of the defendant(s)/respondent(s).)

08 Civ. 2208 (VM) ()

AFFIRMATION OF SERVICE

I, Horace Gaines

(name)

, declare under penalty of perjury that I have

served a copy of the attached Civil Rights Act ,42 U.S.C. § 1983

(document you are serving)

upon UNITED STATES DISTRICT Court

(name of person served)

OF s.d.

whose address is 500 Pearl St

New york, New York 10007 Room 230

(where you served document)

by Ordinary first-Class Mail

(how you served document: For example - personal delivery, mail, overnight express, etc.)

Dated: Bronx, N.Y.

(town/city)

(state)

May, 7, 2008

(month)

(day)

(year)

State of New York
County of The Bronx, ss.
Sworn To Before Me
on 05/07/08
Igor Naz Sulehria

IGOR NAZ SULEHRIA
NOTARY PUBLIC, State of New York
No. 6180602000
Qualified in Kings County
Commission Expires Nov. 27, 2009

Horace Gaines

Signature

15-15 Hazen St.

Address

East Elmhurst

City, State

New York 11370

Zip Code

NONE NONE

Telephone Number

To: the Pro-se Office
United state District Court
Southern district Of New York

May ,7 2008

From: Plaintiff Horace Gaines
GMDC 15-15 Hazen Street
east Elmhurst, N.Y. 11370

08Civ02208 (VM)

RE: Filing a New Complaint and amending the Defendant(s)

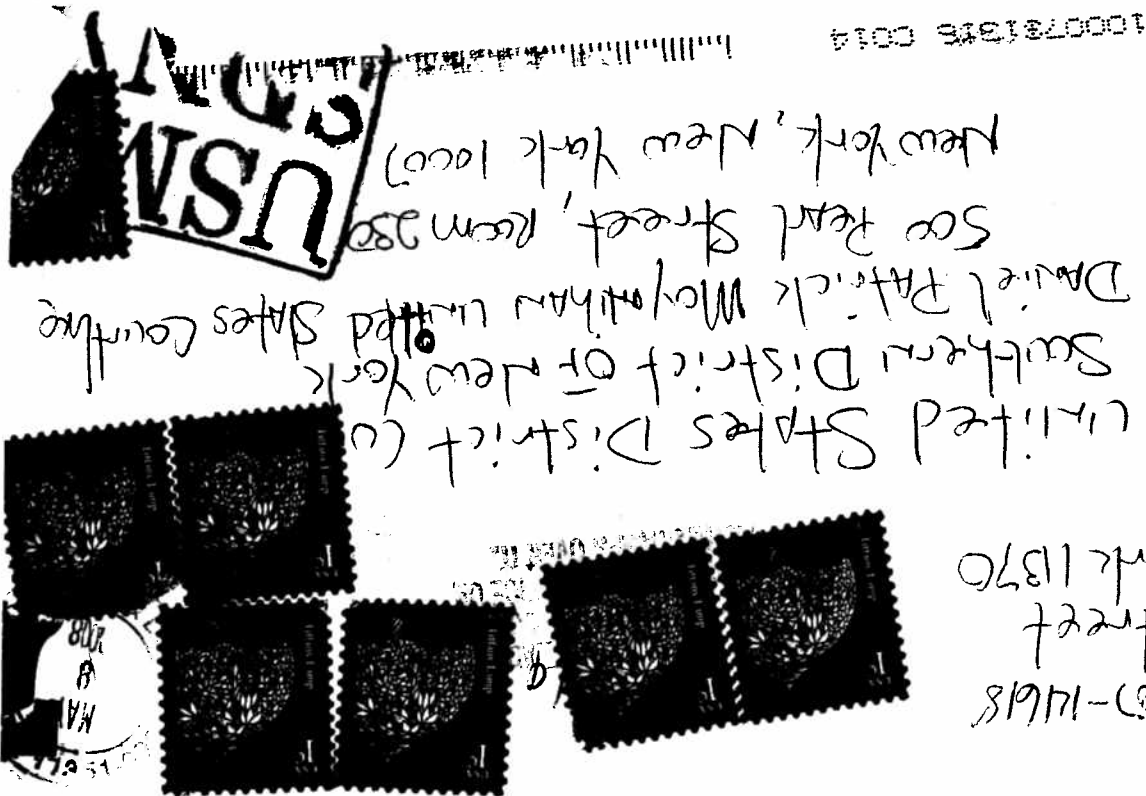
Dear Sir/Madam,

Please acknowledge that the Plaintiff Is
amending the complaint with the names of two new defendant's

Thank You For Your Time

Respectfully Yours

Horace Gaines
Horace Gaines
15-15 Hazen St.
East Elmhurst,
New York 11370



GRACE GARLES 441-67-14618
2-15-15 Hazen Street
Elmhurst, New York 11370